2002 UNIFORM BUSINESS REPORT (UBR)

Jul 22, 2002 8:00 am Secretary of State P00000108763 DOCUMENT # 1. Entity Name 07-22-2002 90155 033 ***150.00 JUST YOUR LOCK, INC. Principal Place of Business Mailing Address 22718 VISTAWOOD WAY 22718 VISTAWOOD WAY B0130489 **BOCA RATON FL 33428 BOCA RATON FL 33428** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-1058525 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BEEKMAN, MARSHA Street Address (P.O. Box Number is Not Acceptable) 22718 VISTAWOOD WAY **BOCA RATON FL 33428** City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. **PSTD** TITLE ☐ Defete TITI F ☐ Change ☐ Addition BEEKMAN, MARSHA NAME NAME STREET ADDRESS 22718 VISTAWOOD WAY STREET ADDRESS **BOCA RATON FL 33428** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS C!TY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

AND TYPED OR PRINTED MAME OF SIGNING OFFICER OR DIRECTOR

FILED

1-561-488-2442 TEL 1-800-846-5622 TOLL FREE 1-561-488-7146 FAX



POUDUD 10876 3
8128 CORMYOUR WAY
BOYNTON BEACH, FLORIDA
33437

July 16, 2002

Department of State Division of Corporations Uniform Business Report Findings P.O. Box 1500 Tallahassee, FL. 32302-1500

RE: Just Your Lock, Inc.

I am the accountant for the above named corporation. We are in receipt of the 2002 uniform Business Report asking for \$550.00. I called the Division of Corporations in Tallahassee and informed them that we never received the original report. They told me to write a letter and send in the second report together with a check for \$150.00. I am herewith enclosing a check for the \$150.00.

Thanking you for your kind consideration in this matter.

Sincerely,

Morton Amster